

SERFF Tracking Number:	NYPX-125633655	State:	Arkansas
Filing Company:	New York Life Insurance & Annuity Corporation	State Tracking Number:	38856
Company Tracking Number:	22791 (5/08)		
TOI:	L08 Life - Other	Sub-TOI:	L08.000 Life - Other
Product Name:	Investor Profile 2008		
Project Name/Number:	Investor Profile 2008/22791 (5/08)		

Filing at a Glance

Company: New York Life Insurance & Annuity Corporation

Product Name: Investor Profile 2008

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: NYPX-125633655 State: ArkansasLH

SERFF Status: Closed

State Tr Num: 38856

Co Tr Num: 22791 (5/08)

State Status: Approved-Closed

Co Status:

Reviewer(s): Linda Bird

Author: SPI

Disposition Date: 05/05/2008

NYLProductCompliance

Date Submitted: 05/02/2008

Disposition Status: Approved

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Investor Profile 2008

Project Number: 22791 (5/08)

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 05/05/2008

State Status Changed: 05/05/2008

Corresponding Filing Tracking Number:

Filing Description:

See Cover Letter.

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

Company and Contact

Filing Contact Information

Bill Bifulco,

51 Madison Avenue

(212) 576-7962 [Phone]

SERFF Tracking Number: NYPX-125633655 State: Arkansas
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New York, NY 10010 (212) 447-4141[FAX]

Filing Company Information

New York Life Insurance & Annuity Corporation CoCode: 91596 State of Domicile: Delaware
51 Madison Avenue Group Code: 826 Company Type: Life
Room 604
New York, NY 10010 Group Name: State ID Number:
(212) 576-4809 ext. [Phone] FEIN Number: 13-3044743

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Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	Yes
Fee Explanation:	\$50.00 per form
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
New York Life Insurance & Annuity Corporation	\$50.00	05/02/2008	20073445

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	05/05/2008	05/05/2008

<i>SERFF Tracking Number:</i>	<i>NYPX-125633655</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New York Life Insurance & Annuity Corporation</i>	<i>State Tracking Number:</i>	<i>38856</i>
<i>Company Tracking Number:</i>	<i>22791 (5/08)</i>		
<i>TOI:</i>	<i>L08 Life - Other</i>	<i>Sub-TOI:</i>	<i>L08.000 Life - Other</i>
<i>Product Name:</i>	<i>Investor Profile 2008</i>		
<i>Project Name/Number:</i>	<i>Investor Profile 2008/22791 (5/08)</i>		

Disposition

Disposition Date: 05/05/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	NYPX-125633655	State:	Arkansas
Filing Company:	New York Life Insurance & Annuity Corporation	State Tracking Number:	38856
Company Tracking Number:	22791 (5/08)		
TOI:	L08 Life - Other	Sub-TOI:	L08.000 Life - Other
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Application		No
Supporting Document	Cover Letter		Yes
Supporting Document	Certification/Notice		No
Form	Client Profile		Yes

SERFF Tracking Number: NYPX-125633655 State: Arkansas

Filing Company: New York Life Insurance & Annuity Corporation State Tracking Number: 38856

Company Tracking Number: 22791 (5/08)

TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other

Product Name: Investor Profile 2008

Project Name/Number: Investor Profile 2008/22791 (5/08)

Form Schedule

Lead Form Number: 22791 (5/08)

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	22791 (5/08)	Application/ Client Profile Enrollment Form	Revised	Replaced Form #: 22089 Previous Filing #:	47	22791 (5_08).PDF

I. CLIENT PROFILE

Application Number: _____ Policy Number: _____

FINRA rules require the registered representative to have reasonable grounds for believing that this sale is suitable for the customer(s). This decision will be based on the facts disclosed by the customer after a reasonable inquiry and on other information known by the registered representative.

A. Owner Information

Owner Name _____ Date of Birth _____
SSN or TIN _____ Marital Status ☐ S ☐ M No. of Dependents _____
Address _____ City _____ State _____ Zip _____
Home Telephone _____ Business Telephone _____ E-mail Address (optional) _____
Occupation _____ (please check one if applicable)
☐ Full-Time Student ☐ Child/Dependent ☐ Homemaker ☐ Retired
Employer (if applicable) _____
Address of Employer _____ City _____ State _____ Zip _____
If Owner is associated with a FINRA member firm, please provide name and address of firm _____

B. Owner Financial Information *Requirements are detailed in the instructions*

1. What is your current annual income? \$ _____
Income: Include income from all sources, before taxes
2. What is your estimated current federal income tax bracket? ☐ 0 - 10% ☐ 11 - 28% ☐ Over 28%
3. What is your estimated current liquid net worth? \$ _____
Liquid Net Worth: That part of your net worth held in cash or in assets easily convertible to cash, including retirement assets. This should not include the value of real estate, personal property, automobile(s), or business interests as these assets may not be readily converted to cash.

C. Joint-Owner Information *Does not apply to Trusts or Corporations*

Joint-Owner Name _____ Date of Birth _____
SSN or TIN _____ Marital Status ☐ S ☐ M No. of Dependents _____
Address _____ City _____ State _____ Zip _____
Home Telephone _____ Business Telephone _____ E-mail Address (optional) _____
Occupation _____ (please check one if applicable)
☐ Full-Time Student ☐ Child/Dependent ☐ Homemaker ☐ Retired
Employer (if applicable) _____
Address of Employer _____ City _____ State _____ Zip _____

Joint-Owner Financial Information

(If Joint-Owner is the spouse, financial information should be included in the Owner Financial Information above; therefore do not complete below.)

1. What is your current annual income? \$ _____
Income: Include income from all sources, before taxes
2. What is your estimated current federal income tax bracket? ☐ 0 - 10% ☐ 11 - 28% ☐ Over 28%
3. What is your estimated current liquid net worth? \$ _____
Liquid Net Worth: That part of your net worth held in cash or in assets easily convertible to cash, including retirement assets. This should not include the value of real estate, personal property, automobile(s), or business interests as these assets may not be readily converted to cash.

Relationship to Owner: ☐ Spouse ☐ Other _____

If the joint-owner is associated with a FINRA member firm, please provide name and address of firm _____

D. Risk Tolerance/Investment Objective

I want to use the questionnaire score to determine my investment objective. ☐ Yes ☐ No
(Note: If you did not complete the questionnaire, check NO)

If Yes, enter Total Score here in box.....

and complete only the Investment Objective Section below.

If No, please complete both Risk Tolerance and Investment Objective Sections.

REFERENCE TABLE

Total Score	Investment Objective
27 - 51	A Income with Capital Preservation
40 - 70	B Income with Moderate Growth
61 - 86	C Growth with Income
72 - 97	D Growth
84 - 100	E Aggressive Growth

Risk Tolerance (Do not complete if using the Total Score from the questionnaire)

Instructions: If you are not using the questionnaire score answer the following question:

"How would you classify your tolerance for market risk and loss of principal?"

Investment Objectives
Corresponding to
Risk Tolerance

<input type="checkbox"/> Conservative (Prefer little risk and low volatility in return for accepting potentially lower returns. Minimizing exposure of principal to loss or fluctuation is very important)	A only
<input type="checkbox"/> Moderately Conservative (Willing to take some risk to seek enhanced returns. Reduced exposure of principal to loss or fluctuation is important)	A or B only
<input type="checkbox"/> Moderate (Willing to assume an average amount of market risk and volatility or loss of principal to achieve higher returns)	A or B or C only
<input type="checkbox"/> Moderately Aggressive (Willing to assume an above average amount of risk and volatility or loss of principal to take advantage of potentially higher return opportunities)	A or B or C or D only
<input type="checkbox"/> Aggressive (Willing to sustain substantial volatility or loss of principal and assume a high level of risk in pursuing higher returns)	A or B or C or D or E

Investment Objective

Instructions: Choose one Investment Objective below that matches your questionnaire score or your Risk Tolerance chosen above. Consult the Reference Table above to match your score to your Investment Objective. If you choose a Risk Tolerance, match it correctly to your Investment Objective below.

- ☐ **A. Income with Capital Preservation** (Score 27 – 51) (Any Risk Tolerance)
For the investor who seeks investment stability and liquidity with a primary portfolio objective to preserve capital while providing income. Fluctuations in the values of portfolios of this type are usually minimal.
No premium may be allocated to investment divisions classified as high and/or highest risk if the investor has a Conservative risk tolerance or if the questionnaire score is between 27 and 39. No more than 20% of the premium may be allocated to investment divisions classified as high and/or highest risk for all other investors.
- ☐ **B. Income with Moderate Growth** (Score 40 – 70) (Moderately Conservative, Moderate, Moderately Aggressive, or Aggressive Risk Tolerance)
For the investor who seeks current income and modest long-term growth, with a slightly higher risk tolerance than the investor in the capital preservation category. Primary portfolio objective is current income. Fluctuations in the values of portfolios of this type may occur from year to year.
No more than 30% of the premium may be allocated to investment divisions classified as high and/or highest risk if the investor has a Moderately Conservative risk tolerance or if the questionnaire score is between 40 and 60. No more than 40% of the premium may be allocated to investment divisions classified as high and/or highest risk for all other investors.
- ☐ **C. Growth with Income** (Score 61 – 86) (Moderate, Moderately Aggressive, or Aggressive Risk Tolerance)
For the investor who seeks relatively stable long-term growth with a low level of income and has a moderate risk tolerance. Primary portfolio objective is to achieve steady long-term growth. Fluctuations in the values of portfolios of this type are usually less than those of the overall stock markets.
No more than 50% of the premium may be allocated to investment divisions classified as high and/or highest risk if the investor has a Moderate risk tolerance or if the questionnaire score is between 61 and 71. No more than 60% of the premium may be allocated to investment divisions classified as high and/or highest risk for all other investors.
- ☐ **D. Growth** (Score 72 – 97) (Moderately Aggressive or Aggressive Risk Tolerance)
For the investor who seeks capital appreciation. Primary portfolio objective is above-average capital appreciation. Fluctuations in the values of portfolios of this type are usually the same as those of the overall stock markets.
No more than 80% of the premium may be allocated to investment divisions classified as high and/or highest risk.
- ☐ **E. Aggressive Growth** (Score 84 – 100) (Aggressive Risk Tolerance only)
For the investor who seeks maximum capital appreciation. Primary portfolio objective is aggressive capital appreciation. Fluctuations in the values of portfolios of this type are substantial from year to year and are more than the overall stock markets.
Up to 100% of the premium may be allocated to investment divisions classified as high and/or highest risk.

E. Investment Experience *Special Note in Section E on Instruction Page for owners age 71 or more*

1. Have you ever purchased any investment products such as mutual funds, limited partnerships, variable life insurance or variable annuity products, options, stocks, or bonds? If "No" answer question 2..... ☐ Yes ☐ No
2. Have you received the "What To Consider Before You Invest" information? (form #13860) ☐ Yes ☐ No

F. Time Horizon

1. How long do you plan to keep this product? _____ years

G. Source of Funds

Complete this section if this purchase is financed by a loan, partial withdrawal, dividend withdrawal, surrender, redemption or liquidation from any existing Life Insurance Policy, Annuity, Mutual Fund or Certificate of Deposit (CD).

In some instances, using a product you own as a source of funds to finance a new purchase may not be in your best interest. You should also be aware that using funds from existing products may subject you to certain sales or surrender charges, or other penalties as noted below. Contact the company that issued or sold your existing product, check the prospectus or the annual statement for that product, and/or consult your registered representative, tax or legal advisor to determine the impact of using your existing product as a source of funds. You should also consult with your registered representative and review the applicable product prospectus to determine any additional charges that may be associated with your new product purchase.

Check the appropriate product box below to identify the Source of Funds being used for this purchase. In addition, specific details for each policy/account must be fully completed. If any pertinent policy/account information is omitted, the application will be incomplete and the purchase/transfer may be delayed.

I/We understand that:

☐ Life Insurance

There may be a surrender charge on the life insurance policy from which I/we have taken a withdrawal or loan or that I/we have terminated or reduced. The surrender of a life insurance policy may result in taxable income (not applicable to certain exchanges under Section 1035 of the Internal Revenue Code). In addition, as a result of this withdrawal or loan, the protection afforded by the life insurance policy may be terminated or reduced.

Policy Number	Type	Purchase Date	Surrender Charge
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed <input type="checkbox"/> Term		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed <input type="checkbox"/> Term		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed <input type="checkbox"/> Term		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed <input type="checkbox"/> Term		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more

☐ Annuities

There may be a surrender charge on the annuity being surrendered. The surrender of an annuity contract may result in taxable income. In addition, if the Annuitant is under age 59 1/2, I may incur an additional 10% IRS imposed penalty on any earnings taken in a distribution. (Not applicable to certain exchanges under Section 1035 of the Internal Revenue Code, Rollovers, or Transfers of existing annuities.)

Policy Number	Type	Purchase Date	Surrender Charge
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
	<input type="checkbox"/> Variable <input type="checkbox"/> Fixed		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more

☐ Mutual Funds

I am liquidating mutual fund shares to fund this purchase. The Purchase Date, referenced below, is the most recent Trade Date on which shares were purchased. I may be assessed a sales charge on the mutual fund redemption if the shares I am selling are subject to a back-end load (Contingent Deferred Sales Charge).

Account Number	Fund Family	Share Class	Purchase Date	Contingent Deferred Sales Charge
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Other		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Other		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Other		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Other		<input type="checkbox"/> 0% <input type="checkbox"/> 1% <input type="checkbox"/> 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% or more

☐ CD

The investment divisions or the mutual fund shares being purchased are not backed or guaranteed by any bank or insured by the FDIC; and are subject to investment risks, which may involve the loss of the principal amount invested. If I/we liquidate a Certificate of Deposit (CD) prior to maturity, I/we may be required to pay a penalty.

Variable Life Insurance and Variable Annuities are issued by New York Life Insurance and Annuity Corporation (a Delaware Corporation), 51 Madison Avenue, New York, NY 10010.

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<i>TOI:</i>	<i>L08 Life - Other</i>	<i>Sub-TOI:</i>	<i>L08.000 Life - Other</i>
<i>Product Name:</i>	<i>Investor Profile 2008</i>		
<i>Project Name/Number:</i>	<i>Investor Profile 2008/22791 (5/08)</i>		

Rate Information

Rate data does NOT apply to filing.

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TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
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Supporting Document Schedules

Review Status:
Bypassed -Name: Application 05/02/2008
Bypass Reason: N/A
Comments:

Review Status:
Satisfied -Name: Cover Letter 05/02/2008
Comments:
Attachment:
Cover Letter.PDF

Review Status:
Bypassed -Name: Certification/Notice 05/02/2008
Bypass Reason: N/A
Comments:

April 14, 2008

Hon. Julie Benafield Bowman
Insurance Commissioner
Arkansas Insurance Department
Division of Compliance
Life and Health
1200 West Third Street
Little Rock, AR 72201-1904

RE: New York Life Insurance and Annuity Corporation
NAIC #: 82691596
Client Profile Form 22791 (5/08)

Dear Commissioner:

We are enclosing for your approval Client Profile Form 22791 (5/08). This form is intended for use when applying for our Variable Universal Life Insurance family of products. This form replaces form 22089 (5/06), which was approved by your Department on 4/14/2006.

The enclosed form is intended for use as a supplement to our current Part I Application, form 204-500.03, which was approved by your department on 1/24/2004.

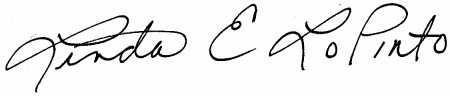
The purpose of this form is to gather information from individuals applying for the variable universal life insurance policies listed on the attached Exhibit I to determine the suitability of this type of policy for that individual. It solicits financial information, investment objectives, experience with investing, investment time horizons and sources of funding.

In addition to the application, Form 22791 (5/08) is used in conjunction with two other supplementary application forms.

- Premium Allocation Form 22090 (5/06), which was approved by your Department on 5/8/2006. This form is used when applying for our variable universal life policies. It includes disclosure and signature sections which apply to both the Client Profile and Premium Allocation forms.
- Premium Allocation Form 22315 (5/06), which is used when applying for our Pinnacle series VUL and Pinnacle series SVUL policies. It also includes disclosure and signature sections that apply to both forms. It was approved by your Department on 5/25/2006.

We look forward to receiving your Department's approval of the enclosed forms at your earliest convenience. If you have any questions regarding this submission, please call me at the following toll free number: 1-877-464-0198.

Sincerely,

A handwritten signature in black ink that reads "Linda E. LoPinto". The signature is written in a cursive style with a large, stylized "L" and "P".

Linda E. LoPinto
Corporate Vice President
Individual Life Department

Encl.

EXHIBIT I

Client Profile Form 22791 (5/08) will be used with applications for the following policy forms:

<u>Policy Title</u>	<u>Form Number</u>	<u>Approval Date</u>
Variable Universal Life 2000 (VUL 2000)	302-90	4/9/2002
Survivorship Variable Universal Life (SVUL)	302-150	4/9/2002
Single Premium Variable Universal Life (SPVUL)	303-95	1/21/2003
VUL Provider	303-30	3/20/2003
Pinnacle Variable Universal Life	300-80 & 300-82	3/16/2001
Pinnacle Survivorship Variable Universal Life	300-81 & 300-83	3/16/2001